

For official use only:				
AP	P #:			
Co	mplete	9		

40 Year Building Safety Inspection Report Submittal Application

Please make sure your package includes the following with this application: □ Building Safety Inspection Report Form – Structural □ Building Safety Inspection Report Form – Electrical □ Payment of two hundred and ten dollars (\$210.00) payable by Cash, Check, Visa, MasterCard or Discover Card							
PROPERTY INFORMATION							
Name of Plaza/Condo Association							
Property Address		Zip					
Folio #	Legal: Lot	Block S	Section				
Application Type: ☐ 40 Year Recertification ☐	40 Year Recertification Re	-Check					
Tracking # from 40 Year Notification	Bu	Building Square Footage					
Permit Numbers for Repairs	/	/					
OWNER INFORMATION							
Name/Association							
Address		State	Zip				
Phone							
Contact Name		hone					
Owner's Agent							
LICENSED PROFESSIONAL CONTACT INFORM Associated Professional # 1: Engineer A		ŧ					
Company Name							
Address		_State_	Zip				
Phone_	- "						
Contact Name	_	hone					
		<u> </u>					
Company Name							
Address	City	State	Zip				
Phone_	Email						

Contact Phone_

Contact Name_